PTO/SB/06 (07-06) Approved for use through 1/31/2007, OMB 0651-0032

Approve for use into grant and a support of the sup

PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875											ing Date 10/2003	To be Mailed	
APPLICATION AS FILED – PART I (Column 1) (Column 2)								OTHER THAN SMALL ENTITY □ OR SMALL ENTITY					
FOR NUM			UMBER FI	LED	NUMBER EXTRA			RATE (\$)	FEE (\$)		RATE (\$)	FEE (\$)	
	BASIC FEE (37 CFR 1.16(a), (b),	or (c))	N/A		N/A			N/A		1	N/A		
	SEARCH FEE (37 CFR 1.16(k), (i),	or (m))	N/A		N/A			N/A			N/A		
	EXAMINATION FE (37 CFR 1.16(o), (p),	E or (q))	N/A		N/A			N/A			N/A		
	CFR 1.16(i)		minus 20 =		•			x \$ =		OR	x s =		
	EPENDENT CLAIM CFR 1.16(h))		minus 3 =					x \$ =]	x \$ =		
	APPLICATION SIZE (37 CFR 1.16(s))	FEE shee is \$2 addi	If the specification and drawin sheets of paper, the application is \$250 (\$125 for small entity) additional 50 sheets or fraction 35 U.S.C. 41(a)(1)(G) and 37			n size fee due for each i thereof. See							
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.18(j))										1			
* If	he difference in col	r "0" in col		TOTAL		J	TOTAL	L					
APPLICATION AS AMENDED - PART II OTHER THAN (Column 1) (Column 2) (Column 3) SMALL ENTITY OR SMALL ENTITY													
AMENDMENT	02/01/2007	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR		PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1.16())	· 12	Minus	 32		= 0		x \$ =		OR	X \$50=	0	
	Independent (37 CFR 1.16(h))	• 5	Minus	···17		= 0		x \$ =		OR	X \$200=	0	
	Application Size Fee (37 CFR 1.16(s))												
Ĺ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))									OR			
								TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	0	
(Column 1) (Column 2) (Column 3)													
AMENDMENT		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1,16(i))		Minus	**				x \$ =		OR	x \$ =		
	Independent (37 CFR 1.16(h))		Minus	***				x \$ =		OR	x s =		
	Application Size Fee (37 CFR 1.16(s))]			
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))									OR			
							•	TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE		
**	If the entry in column 1 is less than the entry in column 2, write 0° in column 3. If the "Highest Mamber Proviously Paid For IN THIS SPACE is less than 20, enter "20". If the "Highest Number Proviously Paid For IN THIS SPACE is less than 3, enter "2". The "Highest Number Proviously Paid For IN THIS SPACE is less than 3, enter "2". Deboral Nash Deboral Nash Deboral Nash Deboral Nash												

The considerance of information is required by 37 CER. 1.16. The information is required to obtain or retain a based by the public which his lost life light by the USFTO to moceously an application. Confidentiality is ownered by 80 Sec. 72 and 37 CER. 1.16. This colded no estimated to take 92 annuals to complete a position form to the USFTO. I me well vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or seggeouslone for motioning this burden, about the sent to the CEM information Officer. US. Patient and Trademark Office, U.S. Department of Commerce, P.O. Box 1490, Alexandrias, VA 2213-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patients, P.O. Box 1490, Alexandrias, VA 22313-1450.